

## General

#### Title

Cervical cancer: proportion of patients with cervical cancer who have an MRI of the pelvis performed prior to definitive treatment.

## Source(s)

NHS Scotland, Scottish Cancer Taskforce. Cervical cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Aug. 29 p. [12 references]

# Measure Domain

## Primary Measure Domain

Clinical Quality Measures: Process

# Secondary Measure Domain

Does not apply to this measure

# **Brief Abstract**

# Description

This measure is used to assess the proportion of patients with cervical cancer who have a magnetic resonance imaging (MRI) of the pelvis performed prior to definitive treatment.

Note from the National Quality Measures Clearinghouse: This measure is part of the Cancer Quality Performance Indicators (QPIs) collection. For more information, including a complete list of QPI measure sets, please visit the Healthcare Improvement Scotland Web site.

#### Rationale

It is necessary to fully image the pelvis prior to definitive treatment in order to establish the extent of disease and minimise unnecessary or inappropriate treatment.

#### Evidence for Rationale

## Primary Health Components

Cervical cancer; pelvic magnetic resonance imaging (MRI); definitive treatment

## **Denominator Description**

All patients with cervical cancer (see the related "Denominator Inclusions/Exclusions" field)

## **Numerator Description**

Number of patients with cervical cancer having magnetic resonance imaging (MRI) of the pelvis carried out prior to definitive treatment (see the related "Numerator Inclusions/Exclusions" field)

# **Evidence Supporting the Measure**

## Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

## Additional Information Supporting Need for the Measure

Unspecified

# **Extent of Measure Testing**

The collection of data is piloted on a small number of patient records using a paper data collection form produced by the Information Services Division (ISD). The aim is to identify any anomalies or difficulties with data collection prior to full implementation. At least one NHS board in each Regional Cancer Network participates in the pilot.

# Evidence for Extent of Measure Testing

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p.

# State of Use of the Measure

State of Use

Current routine use

#### Current Use

# Application of the Measure in its Current Use

# Measurement Setting

Ambulatory/Office-based Care

Ambulatory Procedure/Imaging Center

Hospital Inpatient

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Unspecified

Target Population Gender

Female (only)

# National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

# IOM Care Need Getting Better Living with Illness IOM Domain

#### IOM Domaii

Effectiveness

# Data Collection for the Measure

## Case Finding Period

Unspecified

# **Denominator Sampling Frame**

Patients associated with provider

# Denominator (Index) Event or Characteristic

Clinical Condition

#### **Denominator Time Window**

not defined yet

#### Denominator Inclusions/Exclusions

Inclusions

All patients with cervical cancer

#### Exclusions

- Patients with histopathological International Federation of Gynecologists and Obstetricians (FIGO) stage IA1 disease
- Patients treated by large loop excision of the transformation zone (LLETZ) only
- Patients unable to undergo magnetic resonance imaging (MRI) due to contraindications
- Patients with histopathological FIGO stage IVB disease
- Patients who refuse MRI investigation

# Exclusions/Exceptions

not defined yet

#### Numerator Inclusions/Exclusions

#### Inclusions

Number of patients with cervical cancer having magnetic resonance imaging (MRI) of the pelvis carried out prior to definitive treatment

#### Exclusions

- Patients with histopathological International Federation of Gynecologists and Obstetricians (FIGO) stage IA1 disease
- Patients treated by large loop excision of the transformation zone (LLETZ) only
- Patients unable to undergo MRI due to contraindications
- Patients with histopathological FIGO stage IVB disease
- Patients who refuse MRI investigation

## Numerator Search Strategy

Fixed time period or point in time

#### **Data Source**

Electronic health/medical record

Paper medical record

# Type of Health State

Does not apply to this measure

#### Instruments Used and/or Associated with the Measure

Unspecified

# Computation of the Measure

# Measure Specifies Disaggregation

Does not apply to this measure

# Scoring

Rate/Proportion

# Interpretation of Score

Desired value is a higher score

# Allowance for Patient or Population Factors

not defined yet

# Standard of Comparison

not defined yet

# Prescriptive Standard

Target: 95%

The tolerance within this target accounts for situations where patients require urgent treatment before imaging has been performed, or where cervical cancer is an incidental finding at surgery.

## **Evidence for Prescriptive Standard**

NHS Scotland, Scottish Cancer Taskforce. Cervical cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Aug. 29 p. [12 references]

# **Identifying Information**

## Original Title

QPI 1 - radiological staging.

#### Measure Collection Name

Cancer Quality Performance Indicators (QPIs)

#### Measure Set Name

Cervical Cancer

#### Submitter

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

## Developer

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

# Funding Source(s)

Scottish Government

# Composition of the Group that Developed the Measure

Cervical and Endometrial Cancer QPI Development Group

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified
Adaptation
This measure was not adapted from another source.
Date of Most Current Version in NQMC 2016 Aug
Measure Maintenance
The Cancer Quality Performance Indicators (QPIs) will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.
Date of Next Anticipated Revision
Unspecified
Measure Status
This is the current release of the measure.
Measure Availability
Source document available from the Healthcare Improvement Scotland Web site
For more information, contact the Healthcare Improvement Scotland at Gyle Square, 1 South Gyle Crescent, Edinburgh, Scotland EH12 9EB; Phone: 0131 623 4300; E-mail: comments.his@nhs.net; Web site: www.healthcareimprovementscotland.org/
Companion Documents
The following is available:
• NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p. This document is available from the Healthcare Improvement Scotland Web site.

# NQMC Status

This NQMC summary was completed by ECRI Institute on May 16, 2017.

# Copyright Statement

No copyright restrictions apply.

# Production

Source(s)

NHS Scotland, Scottish Cancer Taskforce. Cervical cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Aug. 29 p. [12 references]

# Disclaimer

## **NQMC** Disclaimer

The National Quality Measures Clearinghouseâ,  $\phi$  (NQMC) does not develop, produce, approve, or endorse the measures represented on this site.

All measures summarized by NQMC and hosted on our site are produced under the auspices of medical specialty societies, relevant professional associations, public and private organizations, other government agencies, health care organizations or plans, individuals, and similar entities.

Measures represented on the NQMC Web site are submitted by measure developers, and are screened solely to determine that they meet the NQMC Inclusion Criteria.

NQMC, AHRQ, and its contractor ECRI Institute make no warranties concerning the content or its reliability and/or validity of the quality measures and related materials represented on this site. Moreover, the views and opinions of developers or authors of measures represented on this site do not necessarily state or reflect those of NQMC, AHRQ, or its contractor, ECRI Institute, and inclusion or hosting of measures in NQMC may not be used for advertising or commercial endorsement purposes.

Readers with questions regarding measure content are directed to contact the measure developer.